



STATE OF MARYLAND

DHMH

Office of Health Services  
Medical Care Programs

PT 5-04

Maryland Department of Health and Mental Hygiene  
201 W. Preston Street • Baltimore, Maryland 21201

Robert L. Ehrlich, Jr., Governor – Michael S. Steele, Lt. Governor – Nelson J. Sabatini, Secretary

**MARYLAND MEDICAL ASSISTANCE PROGRAM**  
**Home Health Transmittal No. 37**  
**August 7, 2003**

Home Health Agency Administrators

**FROM:**

*Susan J. Tucker*  
Susan Tucker, Executive Director  
Office of Health Services

**NOTE:**

Please ensure that appropriate staff members in your organization are informed about the contents of this transmittal.

Preauthorization

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Pursuant to COMAR 10.09.04.06A(2), preauthorization is required for services rendered in any thirty-day period for which the provider anticipates interim payments in excess of the Medicaid average nursing facility rate. Effective July 1, 2003, this rate is \$5,101.80. All other preauthorization procedures remain the same.

Questions concerning this transmittal should be directed to the Staff Specialist for Home Health Services at (410) 767-1448 or 1-877-4MD-DHMH extension 1448.

